

IMLS BUDGET FORM

- a. Legal name (5a from SF-424S):
- b. Requested Grant Period From: (MM/DD/YYYY)Through: (MM/DD/YYYY)
- c. If this is a revised budget, indicate application/grant number:

1. Salaries and Wages

Name/Title or Position	Year 1		Year 2		Year 3		Total		
	Grant Fund	Cost Share	Grant Fund	Cost Share	Grant Fund	Cost Share	Grant Fund	Cost Share	Grand Total
Salaries and Wages Subtotal									

2. Fringe Benefits

Description (% or item)	Year 1		Year 2		Year 3		Total		
	Grant Fund	Cost Share	Grant Fund	Cost Share	Grant Fund	Cost Share	Grant Fund	Cost Share	Grand Total
Fringe Benefits Subtotal									

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3. Consultant Fees

Name or Type of Consultant	Year 1		Year 2		Year 3		Total		
	Grant Fund	Cost Share	Grant Fund	Cost Share	Grant Fund	Cost Share	Grant Fund	Cost Share	Grand Total
Consultant Subtotal									

4. Travel

From/To and Purpose	Year 1		Year 2		Year 3		Total		
	Grant Fund	Cost Share	Grant Fund	Cost Share	Grant Fund	Cost Share	Grant Fund	Cost Share	Grand Total
Travel Subtotal									

5. Supplies and Materials

Item	Year 1		Year 2		Year 3		Total		
	Grant Fund	Cost Share	Grant Fund	Cost Share	Grant Fund	Cost Share	Grant Fund	Cost Share	Grand Total
Supplies & Materials Subtotal									

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6. Services

Item	Year 1		Year 2		Year 3		Total		
	Grant Fund	Cost Share	Grant Fund	Cost Share	Grant Fund	Cost Share	Grant Fund	Cost Share	Grand Total
Services Subtotal									

7. Student Support

Item	Year 1		Year 2		Year 3		Total		
	Grant Fund	Cost Share	Grant Fund	Cost Share	Grant Fund	Cost Share	Grant Fund	Cost Share	Grand Total
Student Support Subtotal									

8. Other Costs

Item	Year 1		Year 2		Year 3		Total		
	Grant Fund	Cost Share	Grant Fund	Cost Share	Grant Fund	Cost Share	Grant Fund	Cost Share	Grand Total
Other Costs Subtotal									

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a. Legal name (5a from SF-424S):

9. Total Direct Costs

	Year 1		Year 2		Year 3		Total		
	Grant Fund	Cost Share	Grant Fund	Cost Share	Grant Fund	Cost Share	Grant Fund	Cost Share	Grand Total
Subtotals (Items 1-8)									

10. Indirect Costs (Read the instructions about Indirect Costs before completing this section)

Current indirect cost rate(s) have been negotiated with a federal agency.

Name of Agency:

Expiration Date:

Indirect cost proposal has been submitted to a federal agency but not yet negotiated.

Name of Agency:

Proposal Date:

Applicant chooses a rate not to exceed 15% of direct costs.

Applicant chooses not to include indirect costs.

Rate and Base	Year 1		Year 2		Year 3		Total		
	Grant Fund	Cost Share	Grant Fund	Cost Share	Grant Fund	Cost Share	Grant Fund	Cost Share	Grand Total
Indirect Costs Subtotal									

11. Total Project Costs

	Year 1		Year 2		Year 3		Total		
	Grant Fund	Cost Share	Grant Fund	Cost Share	Grant Fund	Cost Share	Grant Fund	Cost Share	Grand Total
Total Direct & Indirect Costs									
Total Costs (excluding student support)									